

Department of Public Safety and Correctional Services

Maryland Commission on Correctional Standards

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> THOMAS REECE CHAIRPERSON

VERONICA D. MOORE EXECUTIVE DIRECTOR

276th Commission (Virtual) Meeting

March 31, 2022

Minutes

MEMBERS PRESENT:

Major Thomas D. Reece, Administrator Calvert County Detention Center, Chairperson

Delores Alexander, Citizen Member

Montrell Spence, Citizen Member

Beverly Hughes, Assistant Attorney General, representing Attorney General Brian E. Frosh

Terry Kokolis, Director, Talbot County Department of Corrections

Nelson Reichart, Deputy Secretary, Department of General Services, Representing Secretary Ellington E. Churchill, Jr.

Michael Resnick, Commissioner, Division of Pretrial Detention Services

Shakia Word, Budget Analyst, Department of Budget and Management, representing Secretary David R. Brinkley,

MEMBERS ABSENT:

Annie Harvey, Commissioner, Division of Correction Vacant, Healthcare Representative

STAFF PRESENT:

Veronica Moore, Executive Director Cheryle Moyer, Senior Correctional Program Specialist Brian Raivel, Correctional Program Specialist Chaplain Adekolajo I. Aladeseyi Officer Tareda Armwood-Faison LaDonna Newman, Management Associate

VIRTUAL GUESTS:

Colonel Dennis Strine (Warden), Carroll County Detention Center Major Dennis Harmon, Carroll County Detention Center Major Michael Green, Carroll County Detention Center Director Gail Watt, Baltimore County Department of Corrections Deputy Director Renard Brooks, Baltimore County Department of Corrections Major Robert Alford, Baltimore County Department of Corrections Lieutenant Nathan Zahn, Baltimore County Department of Correction Lieutenant Jerlena Rhodes-Cadell, Baltimore County Department of Corrections Mr. Stephen Verch, Baltimore County Department of Corrections Director Kenneth Rodgers, Dorchester County Detention Center Major Thomas Robinson, Dorchester County Detention Center Captain Ronda Stanley, Dorchester County Detention Center Director Brandon Foster, Charles County Detention Center Deputy Director Ryan Ross, Charles County Detention Center Captain Amy Stine, Charles County Detention Center Captain Gerald Duffield, Charles County Detention Center Captain Matthew Dixon, Charles County Detention Center Lieutenant Matthew Irby, Charles County Detention Center Sheriff Jeffery Gahler, Harford County Sheriff's Office Colonel William David, Harford County Sheriff's Office Warden Daniel Galbraith, Harford County Detention Center Major Michael Siler, Harford County Detention Center Captain Wayne Rumsey, Harford County Detention Center Mrs. Christy Rumbaugh, Harford County Detention Center Ms. Jennifer Colenda, Harford County Detention Center

The Maryland Commission on Correctional Standards held the 276th Commission Meeting (Virtual Meeting) via Google Meet. The agenda was as follows:

- 1. Welcome/Introduction/Remarks
- 2. Approval of Minutes, January 27, 2022
- 3. Chair's Comments
- 4. Executive Director's Comments
- 5. Nomination/Vote for Vice Chairperson
- 6. Consideration of Final Audit Reports
 - Carroll County Detention Center
 - Baltimore County Department of Corrections
 - Dorchester County Detention Center
 - Charles County Detention Center and Annex
 - Harford County Detention Center
- 7. New Business
- 8. Announcements
- 9. Adjournment

1. <u>WELCOME/INTRODUCTION/REMARKS</u>

Chairperson T.D. Reece officially called to order the 276th Commission (Virtual) Meeting at 10:00 AM. Chairperson Reece welcomed everyone to the 276th Commission (Virtual) Meeting. Chairperson Reece advised everyone in attendance (remotely) regarding the order of the meeting. Chairperson Reece stated that the meeting would be recorded and minutes would be taken of the meeting. Chairperson Reece reminded members and guests to mute their telephones and computer microphones to reduce interruptions and distractions during the meeting. Chairperson Reece explained the virtual meeting guidelines regarding how the meeting would be conducted. Chairperson Reece advised facility attendees that once their respective audit report is presented, they can exit the meeting, however they are welcome to stay for the duration of the meeting. Chairperson Reece advised the Commission members regarding the voting process for the reports. He stated that he would call for a first and a second by the Commission members. Chairperson Reece stated that the Commission member must state his/her name for the motion and prior to the second to seal the vote for the approval of the report. Chairperson Reece advised the Commission Members that he would only address "nay" responses regarding the voting process. Chairperson Reece stated that the members silence would denote the support and approval of the report. Chairperson Reece requested that each guest state their name and title prior to speaking for the purpose of knowing who is speaking/responding to a question. Chairperson Reece stated that each facility's audit report would be presented in accordance with the agenda and read by a MCCS staff member. Chairperson Reece stated that the Recognition of Achievement awards approved at the meeting would be forwarded to the managing official at a later time. Chairperson Reece deferred to Executive Director Veronica Moore to conduct a Roll Call (attendance) of the Commission members for the purpose of a quorum for the virtual meeting. The Roll Call of the Commission Members was followed by a Roll Call regarding the attendance of the facility representatives and MCCS staff who were present at the virtual meeting.

2. APPROVAL OF MINUTES – JANUARY 27, 2022

Chairperson T.D. Reece entertained a virtual motion/vote on the approval of the Minutes regarding the January 27, 2022 meeting. Citizen Member Delores Alexander made a motion to approve the Minutes of the January 27, 2022 meeting and Director Terry Kokolis seconded. The unanimous response of silence denoted the approval of the Minutes of the January 27, 2022 Commission (Virtual) meeting.

3. CHAIR'S COMMENTS

Chairperson Reece announced the resignation of Dr. Maria Elmo who served as the medical representative on the Board. Chairperson Reece expressed appreciation for the support, wisdom and expertise provided by Dr. Elmo during her tenure on the Commission Board. Chairperson Reece commented that Dr. Elmo's passion for the medical field and questioning of the facilities regarding the need for accountability is unmatched and would be missed. Chairperson Reece stated that the Commission Board extends best wishes to Dr. Elmo regarding her dedication and years of service on the Commission Board.

4. EXECUTIVE DIRECTOR'S COMMENTS

Executive Director Veronica Moore stated that she seconds the comments made by Chairperson Reece regarding Dr. Elmo and her time on the Commission Board. Executive Director Moore expressed her appreciation for the service and dedication provided by Dr. Elmo. Executive Director Moore commented that she believes Dr. Elmo's tenure on the Commission spanned over twenty years. Executive Director Moore remarked that she would like extend a token of appreciation to Dr. Elmo some time down the line in the near future. Executive Director Moore stated that as we move forward and the state relaxes the COVID-19 restrictions, the Maryland Commission on Correctional Standards would be looking at holding in-person Commission meetings. Executive Director Moore stated that the in-person meeting would hopefully be held in July 2022. Executive Director Moore stated that the meeting would be a combination of an in-person meeting and virtual meeting.

5. NOMINATION/VOTE FOR VICE CHAIRPERSON

Chairperson Reece proceeded with the process regarding the Nomination/Vote for Vice Chairperson of the Commission Board. The nomination/vote for the vice chairperson was tabled at 275th Commission/Remote meeting.

Chairperson T.D. Reece turned the meeting over to Executive Director Veronica Moore to preside over the nomination/vote for Vice Chairperson of the Commission Board. Executive Director Moore stated that Ms. Shakia Word served as the Vice Chairperson of the Commission Board. Executive Director Moore stated that Ms. Word expressed that she is no longer interested in serving in the role as the Vice Chairperson on the Commission Board.

Executive Director Veronica Moore opened the floor for nominations for Vice Chairperson of the Commission Board. Chairperson Reece stated that he would be at most of the meetings with the exception of the meeting scheduled on July 28, 2022. Chairperson Reece commented that other than the meeting scheduled in July, which always seems to fall on the week of his scheduled vacation, he will be in attendance to conduct the meetings. Executive Director Moore assured the candidate for Vice Chairperson that he/she would have the full support of MCCS to help guide information and any matters regarding the meetings in order to assist the Chairperson as well as the Vice Chairperson. Executive Director Moore added that the Chair and Vice Chair positions have the full embodiment of the MCCS. Mr. Terry Kokolis (Director of Talbot County Department of Corrections) stated that in the absence of an active Vice Chairperson, he nominated himself to serve in the position as the Vice Chairperson. Executive Director Moore put forth a vote regarding the nomination of Mr. Terry Kokolis to serve as the Vice Chairperson of the Commission Board. Assistant Attorney General Beverly Hughes voted for Mr. Terry Kokolis to serve as the Vice Chairperson of the Commission Board and Citizen Member Delores Alexander seconded. The unanimous response of silence denoted the approval of Mr. Terry Kokolis as the Vice Chairperson of the Commission Board. Director Veronica Moore closed the nominations regarding the Vice Chairperson position. Commission members congratulated Mr. Terry Kokolis on his appointment as the Vice Chairperson of the Commission Board. Mr. Kokolis commented that he is looking forward to facilitating the meeting on July 28, 2022.

6. <u>CONSIDERATION OF AUDIT REPORTS</u>

• CARROLL COUNTY DETENTION CENTER

Senior Correctional Program Specialist Cheryle Moyer reported that an on-site audit at the Carroll County Detention Center was conducted on December 2-3, 2022 by Commission staff and one Duly Authorized Inspector. The Carroll County Detention Center is located in Westminster, Maryland. The detention center houses both male and female pretrial, sentenced and work release inmates classified at the maximum to minimum security levels. The facility operates under the administrative authority of Sheriff James T. DeWees and the daily management of Warden Dennis Strine. After a thorough review of the required audit documentation, the Carroll County Detention Center was found to be in substantial compliance with the standards for an Adult Detention Center. The one identified was regarding: Detainees were not initially classified within one week after admission to consider housing and program assignments, as required by the standard. The Remote Audit Process was initiated for this audit, beginning in 2020 and the facility provided compliance documentation and the pre-audit packet for remote review by the auditors. During the on-site audit, the administration and staff were available to assist and address questions for the auditors. Remote interviews were conducted with the male and female inmates; as well as, remote inventories as a part of the auditing process, during the pre-onsite audit phase of the audit. Primary and secondary documentation was provided via several thumb drives. Although, secondary documentation was provided via thumb drives, a significant amount of documentation was reviewed on-site. The administration and staff were prepared for the audit. The information and documentation was easily accessible to the audit team with staff's assistance. During the on-site audit, primary and secondary documentation was located in the specific areas where the function occurred. The correctional staff were available to escort the audit team, answer questions, and provide documentation to auditors upon request. Pre-audit materials and remote audit documentation was submitted to the MCCS office prior to the audit. The audit team reviewed the facility policies, procedures, post orders, emergency plans, and orientation manuals. This documentation was found to be informative, and functional to the needs of staff, inmates and the community. The facility tour commenced on the first day of the audit. The facility tour was conducted by 4 groups of auditors. Facility staff was assigned to escort the auditors throughout the facility. The facility was found to be clean and in good condition. Minor sanitation and maintenance issues were identified that were addressed prior to the end of the audit. The Maryland Commission on Correctional Standards will conduct a monitoring visit on Wednesday, October 12, 2022 at 9:00 a.m., to assess compliance of the one standard found in non-compliance at the audit. Once compliance has been established, the Carroll County Detention Center may be recommended to receive the Recognition of Achievement Award. The Carroll County Detention Center strives to incorporate the standards in their daily facility operations, for use as an effective management tool. The support and the necessary resources should be consistently provided to the Carroll County Detention Center by the Department of Public Safety and Correctional Services to promote compliance with the standards for an Adult Detention Center.

Chairperson T.D. Reece welcomed comments from the representatives of the Carroll County Detention Center. Colonel Dennis Strine (Warden) commented that the use of a thumb drive and the downloading of documentation to a thumb drive along with other elements of the remote audit process were all new to him. Colonel Strine stated that the administration worked through the process over a course of several months and got it done. Colonel Strine stated that the one deficiency was corrected. Colonel Strine expressed appreciation to the MCCS staff and the audit team for their hard work. He stated that the audit team did a very nice job! Captain Mike Green posed a question to Chairperson Reece. Captain Green asked at what point during the audit review will the facility have the opportunity to address the appeal that was filed by the Carroll County Detention Center regarding standard .06 A (3) Classification. Chairperson Reece responded that the Commission is in receipt of the appeal filed by the facility regarding standard .06 A (3) Classification. Chairperson Reece advised the administration of the Carroll County Detention Center that the appeal would be heard/addressed at the Commission Meeting scheduled on Thursday, July 28, 2022. Chairperson Reece stated that whether the meeting scheduled on July 28, 2022 is in-person or remote has not been determined yet, however the appeal will be heard/addressed at the next meeting. Captain Green asked if the facility would be a part of the meeting. Captain Green stated that he has not received any communication regarding the next scheduled Commission meeting. Chairperson Reece advised Captain Green that they would be a part of the meeting and a notification regarding the meeting would be sent to the administration of the Carroll County Detention Center. Chairperson Reece stated that at the meeting scheduled on July 28, 2022, the administration will get the opportunity to present their position regarding the appeal of standard .06 A (3) Classification. Captain Green inquired about the monitoring visit scheduled on October 12, 2022. Chairperson Reece responded that the outcome of the appeal would determine if the monitoring visit is necessary. Chairperson Reece asked Executive Director Moore would the outcome of the appeal determine if the monitoring visit is necessary or does the monitoring visit still go through its course. Executive Director Moore stated that the monitoring visit depends on the outcome of the appeal.

Chairperson T.D. Reece welcomed questions/comments from the Commission members. Assistant Attorney General Hughes asked a question regarding the non-compliance concerning standard .06 A (3) Classification. Assistant Attorney General Hughes referenced the non-compliance that detainees were not initially classified within one week after admission to consider housing and program assignments, as required by the standard. Assistant Attorney General Hughes asked how long did the issue go on before it was corrected. Colonel Strine responded that it was a technical issue on the part of the Carroll County Detention Center. Colonel Strine stated that the internet capability at the detention center is not very strong. Colonel Strine stated that the staff was classifying the inmates correctly; however it was being entered into the computer the same day that the inmate was classified, but the computer was generating the date which was indicating that the classification process was further along that it actually occurred. Assistant Attorney General Hughes asked if the computer was indicating that the classification process occurred longer than a week because the non-compliance stated that the initial classification process regarding the classification of inmates. He stated that the staff writes the

information on a piece of paper, enters the information into the computer database, sometimes days later, the computer then generates a date which makes it look like the classification process occurred more than a week out. Colonel Strine stated that the process has been changed and now the staff is required to enter the information into the computer database the same day or at least change the dates to reflect the same day that they classified the inmates. Assistant Attorney General Hughes asked Colonel Strine when did the process get corrected. Captain Green stated that the process was corrected immediately following the audit, when it was discovered that the computer was generating the incorrect date. Captain Green added that the facility's policy reflects that inmates are classified within seven days. Captain Green stated that it was an electronic issue and the staff was filing the date of the classification regarding when the paperwork was electronically filed rather than entering the date that the classification of the inmate was actually done. Assistant Attorney General Hughes asked how long was the issue occurring regarding the incorrect dates. Captain Green responded that he could not remember the exact date that the facility began the electronic filing regarding standard .06 A (3) Classification. Captain Green stated that moving forward the facility has ceased filing paperwork and started electronic filing. Captain Green stated that when the facility started electronic filing is when the issued occurred because at the previous audit, the facility was found to be compliant regarding standing .06 A (3) Classification. Assistant Attorney General Hughes commented that she was clear regarding the non-compliance regarding standard .06 A (3) Classification. She stated that it appeared that the issue occurred during a transition to electronic filing from the previous system of filing paperwork.

Chairperson T.D. Reece entertained a virtual motion and vote to approve the audit report and the compliance plan/monitoring visit which is contingent upon the outcome of the appeal. Commissioner Michael Resnick made a motion to approve the audit report and the compliance plan/monitoring visit which is contingent upon the outcome of the appeal and Assistant Attorney General Hughes seconded. The unanimous response of silence denoted the approval of the audit report and the compliance plan/monitoring visit which is contingent upon the outcome of the appeal.

• BALTIMORE COUNTY DEPARTMENT OF CORRECTIONS

Chaplain Adekolajo I. Aladeseyi reported that an on-site audit of the Baltimore County Department of Corrections was conducted was conducted on December 6-8, 2021 by Commission staff and four Duly Authorized Inspectors. The Baltimore County Department of Corrections is located in Towson, Maryland. The facility houses male and female sentenced, pretrial and work release detainees classified at the minimum to maximum levels of security. The facility is under the administrative authority of Administrative Officer Stacy Rodgers and is daily operated and managed by Director Gail Watts. After the required documentation was thoroughly reviewed and inspected, the Baltimore County Department of Corrections was found to be in substantial compliance with the standards for an Adult Detention Center. The identified deficiency was regarding: Records of the daily inventories for the kitchen utensils for the staff dining room and the Bosley kitchen, were not available from April 2021 through December 2021, and the quarterly inspections reports for kitchen utensils for the staff dining room and the Bosley kitchen were not available for the 3rd and 4th quarters of the year 2020 and the 1st, 2nd and 3rd quarters of the year 2021, as required by the BCDC policy #4.1.03 and the standard. The

Remote Audit Process was initiated for this audit and the facility provided compliance documentation and the pre-audit packet for remote review by the auditors. During the on-site audit, the administration and staff were available to assist and address questions for the auditors. Remote interviews were conducted with the male and female inmates; however, remote inventories could not be conducted as a part of the auditing process, during the pre-onsite audit phase of the audit. The facility provided videos of physical inventories of the majority of the required standard counts on a SD card. Primary and secondary documentation was provided via a thumb drive. Although, secondary documentation was provided via a thumb drive, a significant amount of documentation was reviewed on-site. The administration and staff were prepared for the audit. The information and documentation was easily accessible to the audit team with staff's assistance. During the on-site audit, primary and secondary documentation was located in the specific areas where the function occurred. The policy and procedure manuals were available on laptops, with access provided to the county's network system, and addressed the facility's operations, as well as, the standards. The emergency plans and post orders were comprehensive and addressed the needs of staff, inmates and the local community. The inmate orientation materials provide appropriate information and guidance to the inmate population regarding their needs at the facility. Four groups of auditors were assigned to conduct the facility tour. Escorts were assigned to escort the auditors to their assigned areas of the facility. The facility was observed to be in fair condition during the tour. Sanitation and plumbing issues were observed by the auditors, during the tour. The majority of these areas were addressed and areas that required additional time to repair, work orders were submitted to MCCS for the following: non-working telephones in 3C and 2H, low water pressure in cell 2G, a cracked window in cell #9, standing water in dietary A and B, and ceiling lights were out in the staff dining room, medical administration, CL216, cell 2G, multi-purpose room 2Q, recreation area 2Q, multi-purpose room 2V, storage room 4A, and the recreation are 4Q. The Maryland Commission on Correctional Standards will conduct a monitoring visit on Thursday, October 13, 2022 at 9:00 a.m., to assess compliance with the one standard found in noncompliance during the audit. Once compliance has been determined, the Baltimore County Department of Corrections will be recommended to receive the Recognition of Achievement Award. In order to achieve total compliance with the standards for an Adult Detention Center, it is recommended that the Baltimore County Administrators provide the necessary support and resources to the facility. The staff at the Baltimore County Department of Corrections is committed to the use of the standards in their daily operations and as an effective management tool.

Chairperson T.D. Reece welcomed comments from the representatives of the Baltimore County Department of Corrections. Director Gail Watts thanked the Commission Board and the audit team. Director Watts stated that this was a very unusual audit as we all worked through this global pandemic. Director Watts commented that she appreciated the assistance of the MCCS. Director Watts acknowledged the hard work of her staff. Director Watts commented that they always appreciate the guidance and the recommendations from the Commission staff. Director Watts commented that the administration is appreciative of the opportunity to be able to attend the Commission Meeting scheduled on Thursday, July 28, 2022 to appeal the non-compliance concerning standard .03 J (2, 3) Kitchen Utensils and to talk about their opinion concerning the non-compliance.

Chairperson T.D. Reece welcomed questions/comments from the Commission members. Assistant Attorney General Hughes stated that she had a question regarding the non-compliance concerning standard .03 J (2, 3) Kitchen Utensils. Assistant Attorney General Hughes asked Director Watts if they were willing and prepared to answer any questions at this time. Director Watts responded that they were prepared to answer any questions, however it was her understanding that they could not discuss the non-compliance at the present meeting. Director Watts stated that she was advised that any questions would be addressed at the July 28, 2022 meeting at the time the appeal is presented. Assistant Attorney General Hughes raised a question regarding the non-compliance concerning standard .03 J (2, 3) Kitchen Utensils which indicated: Records of the daily inventories for the kitchen utensils for the staff dining room and the Bosley kitchen, were not available from April 2021 through December 2021, and the quarterly inspections reports for kitchen utensils for the staff dining room and the Bosley kitchen were not available for the 3rd and 4th quarters of the year 2020 and the 1st, 2nd and 3rd quarters of the year 2021, as required by the BCDC policy #4.1.03 and the standard. Assistant Attorney General Hughes asked if the records of daily inventories regarding the kitchen utensils were available and if not, why were the records for kitchen utensils unavailable. Director Watts offered the following response. Director Watts stated that the standard is silent when it comes to kitchens that are actually closed. Director Watts stated that because the standard is silent, the facility looks at the results of the previous audits and recommendations of the previous audits. Director Watts stated that the review of the previous audits was perfect because during the previous audit of 2015 and 2018, the facility had a kitchen closure as well, in order to resurface the kitchen floor. Director Watts stated that they completely closed the kitchen and put the kitchen under a twenty-four hour surveillance. She stated that they put up documentation stating that the kitchen was closed. Director Watts stated that during the time that the kitchen was closed, the facility did not conduct inventories during those months that the kitchen was closed. Director Watts stated that when the facility had their audit in 2015 and 2018, they did the exact same procedure regarding the audit in 2015 and 2018 that was done during the most recent 2021 audit and the facility failed the standard during the most recent audit in 2021. Director Watts explained that they were confused because they looked at the previous audit results for guidance and they did the same exact procedure for the 2015 and 2018 audits and were found compliant. Director Watts stated that she felt it was important to note that the same auditor that was assigned the audit responsibility regarding standard (.03 J Kitchen Utensils) during the 2015 and 2018 audit and found the facility compliant, is the same auditor who was assigned the auditing responsibility of auditing the standard (.03 J Kitchen Utensils) during the 2021 audit. Assistant Attorney General Hughes asked Director Watts if she was saying that due to the closure of the kitchen was the reason that the inventories were not conducted during the timeframe of April 2021 through December 2021 and because the kitchen was inoperable. Director Watts responded that the previous statement made by Assistant Attorney General Hughes was correct. Assistant Attorney General Hughes commented that the same situation happened at a previous audit and the facility was not penalized regarding standard .03 J Kitchen Utensils, whereas this time the facility was penalized. Assistant Attorney General Hughes asked if the situation was discussed at any time during the audit. Director Watts responded that the situation was discussed at the time of the audit. Assistant Attorney General Hughes referenced the section of the noncompliance regarding the "1st, 2nd and 3rd quarters of the year 2021 and asked Director Watts is that the part of the non-compliance that she is referring to regarding the non-compliance

concerning standard .03 J Kitchen Utensils because the kitchen was closed. Director Watts responded "yes". Assistant Attorney General Hughes asked if the other minor issues (replacement of light bulbs in areas cited during the tour) were fixed. Director Watts responded that the facility immediately addressed the issues cited during the tour while the audit was still happening.

Chairperson T.D. Reece entertained a virtual motion and vote to approve the audit report and the compliance plan/monitoring visit which is contingent upon the outcome of the appeal. Citizen Member Delores Alexander made a motion to approve the audit report and the compliance plan/monitoring visit which is contingent upon the outcome of the appeal and Commissioner Michael Resnick seconded. The unanimous response of silence denoted the approval of the audit report and the compliance plan/monitoring visit which is contingent upon the outcome of the appeal.

• DORCHESTER COUNTY DETENTION CENTER

Correctional Program Specialist Brian Raivel reported that an on-site audit of the Dorchester County Detention Center was conducted on December 14-15, 2021 by Commission staff and two Duly Authorized Inspectors. The Dorchester County Detention Center is located in Cambridge, Maryland. The facility houses minimum to maximum security, male and female sentenced and pretrial inmates. The detention center is managed daily by Director Kenneth Rodgers, who is under the administrative authority of the Dorchester County Commissioners. After a thorough review of the required documentation, the facility was found to be in substantial compliance with the standards for an Adult Detention Center. The identified deficiency was regarding: The comprehensive health inspection was not conducted by the Department of Mental Health and Hygiene at the facility's dietary department in 2019, as required by the standard. During the on-site audit, the administration and staff were available to assist and address questions for the auditors. The facility utilized Google Meet to assist with facilitating remote reviews, interviews and inventories, during the pre-onsite audit phase of the audit. Primary and secondary documentation was provided via a Google Drive and access granted to the auditors. Significant progress was made regarding the review of standard documentation which allowed for sufficient on-site audit time at the facility to complete further standard reviews. Auditors were provided with documentation as requested and in a timely manner. During the on-site audit, primary and secondary documentation was located in the audit coordinator's office, the multipurpose room and other documentation was located in specific areas where the function occurred. The audit coordinator and other correctional staff were available to escort the audit team, answer questions, and provide documentation to auditors upon request. The current manuals of standard operating procedures were found to be instructional to staff and functional to the needs of the inmates. Emergency plans and post orders addressed staff and inmate concerns and public safety. Inmate Orientation materials addressed those issues important to the inmate population. The facility provided Inmate Handbooks, for review. The facility tour was conducted by 4 groups of auditors to assess the sanitation and maintenance of the facility. There were several repair and maintenance issues cited by the auditors; however, all were addressed and repaired, prior to the audit exit conference. The facility provided a corrective action plan and

photos of the repairs. The staff and inmates are committed to maintaining the sanitation and maintenance of the facility. The Maryland Commission on Correctional Standards will conduct a remote monitoring review on compliance documentation which must be submitted to MCCS by Thursday, September 1, 2022, to assess compliance with the standard found in noncompliance during the remote audit process. Once compliance has been determined, the Dorchester County Detention Center will be recommended to receive the Recognition of Achievement Award. The Dorchester County Detention Center continues to demonstrate a commitment to the standards within their daily operations. As a tool, the standards provide a foundation for total compliance as an Adult Detention Center. The Dorchester County Commissioners should continue to provide the support and resources necessary to sustain total compliance with standards.

**Chairperson Reece lost internet connectivity during the meeting. Executive Director Moore requested that a Commission member step in on an interim basis to facilitate the meeting until such time that Chairperson Reece rejoined the meeting. Director Terry Kokolis (newly appointed Vice Chairperson) welcomed comments from the representatives of the Dorchester County Detention Center. Director Kenneth Rodgers began his comments by addressing the non-compliance regarding standard .03 C Health Inspections. Director Rodgers stated that he contacted the health department and requested a health inspection, however due to the pandemic the health department officials refused to visit the facility. Director Rodgers reported that the Dorchester County Detention Center has had a few inspections since the audit. Director Rodgers commented that hopefully this situation will not happen again. Vice Chairperson Kokolis asked if the only inspection that the facility did not have occurred in calendar year 2019. Director Rodgers responded "yes". Vice Chairperson Kokolis asked if the facility has any correspondence which reflects that the facility requested a health inspection (2019) and the individual responsible for the inspection indicated that they were not available to conduct a site visit. Director Rodgers responded that he could request correspondence to reflect that a health inspection was requested, however it will not fix the non-compliance.

Chairperson Reece rejoined the meeting and resumed facilitating the meeting. Chairperson Reece welcomed additional questions/concerns from the Commission members. Assistant Attorney General Hughes raised a question regarding the comments made by Director Rodgers that he could request correspondence from the health department to support his position that the health department just was not available due to COVID-19 in calendar year 2019. Director Rodgers responded that he could request the correspondence to support his position that the health department was unavailable to visit the facility to conduct a health inspection. Director Rodgers stated that he is aware of other facilities that have requested correspondence from the health department regarding the unavailability of a health official to visit the facility due to COVID-19. Director Rodgers reiterated that he could request and obtain the correspondence regarding the health inspection, but it will not fix the non-compliance.

Chairperson Reece raised a question regarding a recommendation that was made by the audit team regarding standard .01 K (1) Key Control. Chairperson Reece stated the key control is very important. Chairperson Reece referenced the recommendation regarding key control and it was recommended that the facility ensure the key list is updated with the appropriate labels on each key. Chairperson Reece requested Director Rodgers provide insight as to what occurred regarding key control. Director Rodgers explained that there was actually a new key that was added but they failed to label the key.

Chairperson T.D. Reece entertained a virtual motion and vote to approve the audit report. Vice Chairperson Terry Kokolis made a motion to approve the audit report and Citizen Member Delores Alexander seconded. The unanimous response of silence denoted the approval of the audit report. The vote to approve the audit report was unanimous.

• CHARLES COUNTY DETENTION CENTER AND ANNEX

Officer Tareda Armwood-Faison reported that on an on-site audit of the Charles County Detention Center and Annex was conducted on January 11-12, 2022 by Commission staff and two Duly Authorized Inspectors. The Charles County Detention Center and Annex is located in La Plata, Maryland. The facility detains sentenced and pre-trial male and female inmates, housed at the minimum to maximum levels of security. The Annex is closed, effective March 2020 and the County Lockup was temporarily closed during the time of the on-site audit. The facility is managed daily by Director Brandon Foster and comes under the administrative authority of Sheriff Troy D. Berry. After a comprehensive and thorough review of the required documentation, the Charles County Detention Center and Annex was found to be in total compliance with all of the standards for an Adult Detention Center. This is the sixth time that this facility has received total compliance at the time of the audit. The Remote Audit Process was initiated for this audit and the facility provided compliance documentation and the pre-audit packet for remote review by the auditors. During the on-site audit, the administration and staff were available to assist and address questions for the auditors. The facility utilized Google Meet to assist with facilitating remote reviews, interviews and inventories, during the pre-onsite audit phase of the audit. Primary and secondary documentation was provided via a Google Drive and access granted to the auditors. Significant progress was made regarding the review of standard documentation which allowed for sufficient on-site audit time at the facility to complete further standard reviews. The majority of the secondary documentation was provided through the Google Drive, a process that proved to be very functional for auditing the standards. administration and staff were well prepared for the audit. The information and documentation was easily accessible to the audit team with staff's assistance. The Audit Coordinator and his team also provided auditors with documentation as requested and in a timely manner. During the on-site audit, primary and secondary documentation was located in the audit coordinator's office, the roll call room and other documentation was located in specific areas where the function occurred. Additionally, the Google Drive was accessible to the auditors with a computer and laptops available in the roll call room. Facility staff was available to escort and answer questions, as necessary. The current manuals of standard operating procedures were found to be instructional to staff and functional to the needs of the inmates. Emergency plans and post orders addressed staff and inmate concerns and public safety. Inmate Orientation materials addressed those issues important to the inmate population. The facility provided Inmate Handbooks, for review. The physical plant was in excellent condition during the tour of the facility. Four groups of auditors were escorted throughout the facility. During the tour, minor maintenance and sanitation issues were cited by the auditors. The majority of these issues were addressed prior to the end of the on-site audit. Work orders were provided for areas that required additional time to repair, such as, B Dorm resurfacing of shower floor, walls and ceiling for

maintenance and sanitation issues were cited by the auditors. The majority of these issues were addressed prior to the end of the on-site audit. Work orders were provided for areas that required additional time to repair, such as, B Dorm resurfacing of shower floor, walls and ceiling for upper and lower tiers' showers, cell 8, hot water pressure is low; K Dorm re-attach the showerhead and low water pressure; and, Med – 2 and 3 to resurface wall and ceiling in the showers. The facility was found to be clean, sanitary, orderly and well maintained by the staff and inmates. In conclusion, the staff at the Charles County Detention Center and Annex are dedicated and take pride in their facility. The standards are recognized as an important tool in the processes for management of a correctional facility. Their commitment is recognized by the efforts to ensure compliance with the standards of an Adult Detention Center. The county administration is encouraged to continue to provide the necessary support and resources to maintain a high level of compliance. The Charles County Detention Center and Annex is recommended for the Recognition of Achievement Award.

Chairperson T.D. Reece welcomed comments from the representatives of the Charles County Detention Center and Annex. Director Brandon Foster expressed appreciation to the extraordinary staff at the Charles County Detention Center. Director Foster commented that the staff at the Charles County Detention Center ensures that the facility is in compliance with the standards. Director Foster extended a special thanks to Lieutenant Richard Hulvey especially during this audit period for his hard work. Director Foster expressed appreciation to the MCCS staff for helping the facility to work through as efficiently as possible regarding the hybrid model. Director Foster commented that the administration and staff will continue to work hard to continue to maintain a high level of standards at the Charles County Detention Center. Chairperson T.D. Reece congratulated the administration and staff of the Charles County Detention Center for their outstanding achievement of 100% compliance.

Chairperson T.D. Reece entertained a virtual motion and vote to approve the audit report and grant the Recognition of Achievement award. Assistant Attorney General Beverly Hughes made a motion to approve the audit report and grant the Recognition of Achievement award and Deputy Director Nelson Reichart seconded. The unanimous response of silence denoted the approval of the audit report and Recognition of Achievement award. The vote to approve the audit report and Recognition of Achievement award was unanimous. The Commission members congratulated the facility on their achievement. Chairperson Reece noted that this was the sixth time the facility had achieved total compliance with the standards. Citizen Member Delores Alexander stated that the facility deserved a virtual round of applause on their continued achievement of 100% compliance.

• HARFORD COUNTY DETENTION CENTER

Executive Director Veronica Moore reported that an on-site audit of the Harford County Detention Center was conducted on February 1-2, 2022 by Commission staff and one Duly Authorized Inspector. The Harford County Detention Center is in Bel Air, Maryland, houses male and female pretrial and sentenced inmates. The facility operates under the administrative authority of Sheriff Jeffrey R. Gahler and is managed by Warden Dennis Galbraith. After a thorough review of the required documentation, the Harford County Detention Center was found to be in compliance with the majority of the standards for an Adult Detention Center. The deficiencies noted were regarding: Records of the quarterly inspections were not available for spare keys stored in the Chief of Security's office, during the audit period, as required by the standard. Records of quarterly inspections were not available of the medical instruments for the entire audit period and the bulk needles and syringes reflected discrepancies with the physical inventories of the TB Syringes (90 record/200 count) and the Butterfly 21 g Needles (90 record/70 count) and the needles and syringes inventory record, at the on-site audit. The Remote Audit Process was initiated for this audit and the facility provided compliance documentation and the pre-audit packet for remote review by the auditors. During the on-site audit, the administration and staff were available to assist and address questions for the auditors. Remote interviews were conducted with the male and female inmates; however, remote inventories could not be conducted as a part of the auditing process, during the pre-onsite audit phase of the audit. The administration and staff were well prepared for the audit. The information and documentation were easily accessible to the audit team with staff's assistance. During the on-site audit, primary and secondary documentation was located in the audit coordinator's storage space, the conference room and in specific areas where the function occurred. The facility utilized a One Drive for remote documentation and access was granted to the auditors. Although, secondary documentation was provided through the One Drive, a significant amount of documentation was reviewed on-site, which proved challenging to complete, during the on-site auditing process. The facility did provide any necessary documentation requested by the auditors to be saved on the One Drive for review, after the on-site, to assess compliance with respective standards. During the on-site, the current facility computer system proved to be helpful with its ability to generate reports with relevant standard compliance information and should be utilized, in the future as secondary documentation and as a part of the remote audit process. Additionally, the One Drive was accessible to the auditors with a computer and laptops available in the conference room. The policy and procedure manuals were available on laptops, with access provided to the county's network system, and addressed the facility's operations, as well as, the standards. The emergency plans and post orders were comprehensive and addressed the needs of staff, inmates and the local community. The inmate orientation materials provide appropriate information and guidance to the inmate population regarding their needs at the facility. As determined from the audit, the facility reviews their policy and procedure manuals, emergency plans, post orders and orientation materials annually to ensure they address the current requirements of the standards. The facility tour was conducted by four groups of auditors and it was in fair condition at the time of the tour. The auditors cited substantial sanitation and maintenance issues with the older housing units, during the facility tour. The facility staff

addressed many of the sanitation and maintenance issues cited by the auditors; however, many of the housing units need on going and consistent paint and sanitation details to maintain a sanitary environment. Management advised that painting is scheduled for Spring and/or Summer 2022. Additional time is needed for maintenance to address the lower level missing base cover due to a project to replace the flooring throughout the lower level of the building. The base covering is expected to be replaced in March 2022. The kitchen is scheduled for renovation in the Summer of 2022 to include new kitchen equipment. Consistent implementation and enforcement of sanitation policies and expectations is necessary to ensure that staff and inmates are in a healthy and orderly environment. The Maryland Commission on Correctional Standards will conduct a monitoring visit to assess compliance of the two noncompliant standards from the remote audit on Thursday, October 13, 2022 at 9am. Once compliance has been determined, the Harford County Detention Center may be recommended for the Recognition of Achievement Award. Management at the Harford County Detention Center continues to be committed to the standards of the State of Maryland. The staff demonstrates an understanding of the requirements of the standards and utilizes the standards as a tool in the daily operations of the facility. Management must continue to provide guidance to staff and utilize the standards as a tool. The Harford County administration is encouraged to continue to provide the necessary support and resources to maintain a high level of achievement with the standards of an Adult Detention Center.

Chairperson T.D. Reece invited comments from the representatives of the Harford County Detention Center. Warden Daniel Galbraith expressed appreciation to Executive Director Moore and the audit team for their professionalism. Warden Galbraith commented that going through the remote and on-site audit process was a learning experience for the administration and staff. Warden Galbraith commented that the experience was an eye-opener for him. Warden Galbraith stated that being one of the newest wardens in the state of Maryland, he was provided with all of the standards and advised how important the standards were to the operation of the facility. Warden Galbraith stated that he spent the last year reviewing the standards to ensure the facility was compliant with all of the standards. Warden Galbraith reported that they experienced a change regarding the medical provider at the facility. Warden Galbraith reported that medical services were formally provided by Prime Care. Warden Galbraith reported that the new medical provider is Well Path. Warden Galbraith commented that hopefully the facility will be found in total compliance with the standards at the scheduled monitoring visit. He assured the Commission Board that the facility will be 100% compliant at the next audit in three years.

Chairperson T.D. Reece welcomed questions/comments from the Commission members. Assistant Attorney General Hughes requested that the facility expound on the non-compliance regarding standard .02 K (2, 4) Control of Medical and Dental Instruments. Assistant Attorney General Hughes referenced that the non-compliance cited records of quarterly inspections were not available. Assistant Attorney General Hughes asked if the records were missing or the facility just did not have the records at all. Warden Galbraith addressed the issue regarding the dental instruments concerning standard .02 K Control of Medical and Dental Instruments. He stated that on the first day (Wednesday, February 2, 2022) of the audit the dental staff was not present at the facility. Warden Galbraith stated that the facility only holds dental services twice a

week on Thursdays and Fridays. Warden Galbraith stated that on the second day of the audit (Thursday, February 3, 2022) the dental inventories were made available. Warden Galbraith stated that he did not have the dental staff at the facility on the first day of the audit to provide Assistant Attorney General Hughes asked if the facility has the the dental inventories. inventories now. Warden Galbraith responded that the facility has the inventories now. Assistant Attorney General Hughes inquired about the non-compliance regarding standard .01 K (2) Key Control. She asked what occurred regarding the records of the quarterly inspections that were not available for spare keys stored in the Chief of Security Office, during the audit period, as required by the standard. Warden Galbraith explained that it was a new item that was brought to their attention. He stated that it is a locked container that only the chief of security has access to those keys. Warden Galbraith stated that the keys are not in circulation and only the chief of security has control of those keys. Warden Galbraith stated that if there is a key that is out in the key watcher system that is broken or fails, the Chief of Security can replace the key. Warden Galbraith stated that the system regarding key control is the Chief of Security's working inventory that only he has access to. Warden Galbraith stated that the facility has never maintained an inventory of those keys. He stated that it was brought to their attention during the audit and the facility immediately took inventory of all of those items. Warden Galbraith stated that they will continue to take inventory of those items, although they are not out in circulation. Chairperson Reece commented that Warden Galbraith has hit the ground running. Chairperson Reece commented that Warden Galbraith has attended every Wardens' Meeting and is very active at MCAA meetings. Chairperson Reece commented that Warden Galbraith came on board and craved learning all about corrections. Chairperson Reece stated that he appreciates all of the questions/comments presented at the meetings by Warden Galbraith. Chairperson Reece expressed kudos to Warden Galbraith. Chairperson Reece stated that Warden Galbraith is doing an excellent job and he has every confidence that Warden Galbraith and the staff at the Harford County Detention Center is going to achieve 100% compliance under his leadership. Warden Galbraith expressed appreciation regarding the comments made by Chairperson Reece. Chairperson Reece stated that he had several comments/questions regarding recommendation. Chairperson Reece offered the advice of Dr. Elmo (former medical representative) regarding a transition in medical contractors. Chairperson Reece advised the facility officials to be sure to get all files/documentation prior to the transitioning from one medical contractor to another. Chairperson Reece referenced the recommendations cited by the audit team regarding standard .01 K Key Control and standard .05 J Internal Complaint System. Chairperson Reece asked the facility representatives to explain the issue regarding the recommendations. Mrs. Christina Rumbaugh (Standards Manager) responded that the facility conducts a monthly inspection of all of the keys in the facility. Standards Manager Rumbaugh stated that the monthly inspection report that is used by the facility does not include a column to denote satisfactory or unsatisfactory, therefore the employee just writes "all keys checked". Standards Manager Rumbaugh stated that the process has always been, as long as there is nothing listed as being wrong, but in the event there was an issue then the item would be listed, but as long as there was not an issue, it was listed as satisfactory. Standards Manager Rumbaugh stated that it was recommended by the audit team that there needs to be a column included on the form to indicate satisfactory or unsatisfactory. She stated that is was recommended that the

employee use those words (satisfactory or unsatisfactory) when completing the monthly report. Chairperson Reece stated the recommendation regarding standard .05 J Internal Complaint System seems to indicate that the grievances were not being responded to within the 10 day timeframe. Warden Galbraith responded that the facility's policy requires a response to grievances within the 10 day timeframe. Warden Galbraith was providing a response to the question asked by Chairperson Reece, however the internet connectivity was going in/out. Standards Manager Rumbaugh responded that the facility's policy requires a response to grievances within 10 days. Standards Manager Rumbaugh stated that the facility was short-staffed at one point and it took a little longer than 10 days to respond to the grievances. Standards Manager Rumbaugh reported that it was recommended that they extend the time so that they do not run into not meeting their policy in the future. Executive Director Moore added that the facility's policy states 10 days, but it also includes weekends and holidays, which is technically 14 days. Executive Director Moore stated that the computer limits the facility by indicating 10 days which makes the grievance appear to be late, but technically they are not late because the policy includes weekends and holidays.

Chairperson T.D. Reece entertained a virtual motion and vote to approve audit report. Commissioner Michael Resnick made a motion to approve the audit report Vice Chairperson Terry Kokolis seconded. The unanimous response of silence denoted the approval of the audit report.

7. <u>NEW BUSINESS</u>

No New Business was introduced at the 276th Commission (Remote) Meeting.

8. ANNOUNCEMENTS

Executive Director Veronica Moore reported that with the resignation of Dr. Maria Elmo and two other vacancies, the Commission has openings for individuals to serve on the Commission Board. Executive Director Moore stated that the Commission would be looking for a doctor with a medical background and credentials to fill the position formally held by Dr. Elmo. Executive Director Moore stated that the Commission is also looking for an individual to fill the position regarding the elected official vacancy. Executive Director Moore urged all those in attendance to advise the Commission if they know of anyone who may be interested in serving on the Commission Board. She stated that the individual can contact MCCS for assistance with the process in order to serve on the Commission Board. Executive Director Moore stated that MCCS is happy with the current core of members, however changes occur and the Commission Boards needs to fill the vacant positions in order to maintain consistency on the Commission Board. Executive Director Moore stated that information was forwarded via email regarding current/active members to renew their membership on the Commission Board. Executive Director Moore reported that many of the members have renewed their membership regarding maintaining their position on the Commission Board.

9. ADJOURNMENT

Chairperson T.D. Reece entertained a motion to adjourn the 276th Commission (Virtual) Meeting. Citizen Member Delores Alexander made a motion to adjourn the meeting and Vice Chairperson Terry Kokolis seconded. The 276th Commission (Remote) Meeting concluded at 11:13 a.m.